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This service distributes medical news and information to Sailors and Marines, their families, civilian employees, and retired Navy and Marine Corps families. Further dissemination of this email is highly encouraged. Stories in MEDNEWS use these abbreviations after a Navy medical professional's name to show affiliation: MC - Medical Corps (physician); DC - Dental Corps; NC - Nurse Corps; MSC - Medical Service Corps (Navy researchers and administrative managers). Corpsmen and Dental Technician designators are identified in front of their names.

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Headline: Better data collection expected to improve TRICARE patient services
>From TRICARE Management Activity

ALEXANDRIA, Va. -- Have you had difficulty changing your Defense Enrollment Eligibility Report (DEERS) information? Has your Prime enrollment been delayed because your DEERS data doesn't match the information on your enrollment form? Have you shown up for a scheduled appointment with your doctor only to find out that it really didn't get scheduled? Or, has your exam been delayed because your records couldn't be located?

Technology developed at various rates and in different ways throughout the Military Health System, sometimes has resulted in mis-communications and confusion for military beneficiaries and their health care providers. Now, a

special data quality team formed by TRICARE Management Activity is working to fix that.

Richard Guerin, director, Health Programs Analysis and Evaluation, explains that data collection will be more correct, timely, accurate and complete. The various information systems at military treatment facilities will be integrated and data collected for business analyses will be standardized, including financial, clinical workload and enrollment statistics.

There will be greater emphasis on internal management and business practices that include standardization of data quality and increased training of managers. In the future, managers will find many of their program updates and training programs on the TRICARE website.

"The conversion of the Military Health System to a managed care environment has created the need to adopt new and innovative business practices that are data driven," explains James Sears, executive director of TRICARE Management Activity. "This includes the design of business strategies and the ongoing education and training of managers at all levels of the MHS."

The emphasis on data quality also will help ensure that reliable information is provided for audits by the Inspector General and the General Accounting Office, and that the DoD can meet requirements to receive reimbursement under Medicare Subvention.

Initially, the data quality team will focus on Composite Health Care System (CHCS), Ambulatory Data System (ADS), and Medical Expense and Performance Reporting System (MEPRS).

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Headline: Nurse Managed Clinic established at Groton >From Bureau of Medicine and Surgery

GROTON, Conn. -- Patients with minor health care issues or concerns no longer have to schedule appointments within the Primary Care Center at the Naval Ambulatory Care Center (NACC) Groton thanks to the nursing staff.

With the implementation of the Nurse Managed Clinic, nurses at the NACC Primary Care Center, have set out to meet the needs of their local community by increasing access to care. They have expanded the role of ambulatory nursing by opening their doors to walk-in appointments.

Since the clinic opened earlier this year there has been a steady increase in the number of patients seen on the same day basis.

"By taking walk-ins for minor appointments, such as head lice, school physical preliminaries and sore throats at the Nurse Managed Clinic, we have opened up more same day appointments at the Primary Care Center for more acute illness," said LT Scott Johnson, NC, head of the Nurse Managed Clinic.

The multidisciplinary team of professionals address a variety of minor health care issues utilizing established

protocols. The protocols cover, but are not limited to, patients suspected of having chicken pox, pinworm, thrush and strep throat.

In addition to these clinical services a host of services ranging from health promotions to coordinating administrative functions are provided. These services include pregnancy testing, coordinating the initial screening of attention deficit hyperactive disorder patients and immunization screening.

The Nurse Managed Clinic has helped define the role of Navy nursing and improved patient access for health care. -USN-

Headline: Naval Hospital Pensacola is expanding By Rod Duren, Naval Hospital Pensacola

PENSACOLA, Fla. -- Naval Hospital Pensacola will soon begin work on its first major expansion of the 23-year-old medical facility. The congressionally approved military construction project will include a two-story, 73,000 square foot outpatient facility, new parking area and renovations to the existing facility.

The \$22 million project, is scheduled to begin phase one in May 1999. This phase will increase parking by an additional 144 spaces on the eastside of the medical facility.

The next phase of the expansion is the new Outpatient Clinic. The clinic will collocate the majority of the hospital's outpatient services and clinics. Scheduled to be completed in the fall of 2000, the new clinic will house the pharmacy, patient records, family practice, obstetrics/gynecology, pediatrics, ENT, dermatology, ophthalmology, audiology, respiratory therapy, and immunizations.

The last phase of the project will include the renovation of 80 percent of the hospital's patient care areas on the first floor of the original structure. The finished product will have a new labor and delivery area and two new inpatient wards. The new structure will also be upgraded to meet current safety codes and be equipped with modern utility systems. The anticipated completion for the renovation project is in the winter of 2001.

There will be some inconveniences while the project is on going, but the bottom line is the changes mean better, more convenient health care for our beneficiaries.

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Headline: USS Valley Forge Sailor helps save life BY LTJG Tim Griffin, USS Valley Forge

USS VALLEY FORGE -- Recently, a USS Valley Forge (CG 50) Sailor helped save a man from oncoming traffic on an interstate highway in San Diego. While driving back to his barracks room at about 1 a.m., OS3 Robert J. Maxie, noticed

a person lying in the middle of the highway. Immediately, he pulled over and began heroic efforts to save the severely injured man's life.

With the help of another passing motorist, Maxie administered first aid he learned as a CPR qualified stretcher-bearer aboard Valley Forge while other people helped to direct traffic around the scene of the accident.

"First, we wanted to make sure we weren't putting ourselves in danger, and then our next priority was to help comfort the injured man. We didn't want to add to the problem by becoming casualties ourselves," Maxie said.

The motorist assisting Maxie called for an ambulance on his cellular phone. While administering first aid, Maxie discovered that the man had severe facial injuries in addition to two broken legs. Apparently, the man had jumped from an overpass into oncoming traffic.

"I was concerned about the welfare of the man. He was in very bad shape. I just wanted to help keep the man from going into shock. I prayed with him to try to keep him calm," said Maxie.

With his CPR qualification he learned from the Navy, he felt the need to come the aid of the injured man.

"If you have the training, you are obligated to serve your fellow man," Maxie explained.

After the ambulance arrived, the man was quickly taken to the hospital. Maxie and the others who assisted at the scene left almost as abruptly as they had come upon the scene, but with a calming knowledge that they did all they could to help save the man's life.

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Headline: Gitmo wins good neighbor award for community service

By CAPT Bruce K. Bohnker, MC, USNH Guantanamo Bay, Cuba

GUANTANAMO BAY, Cuba -- The Chief of Naval Operations selected U.S. Naval Hospital Guantanamo Bay, Cuba, as the Project Good Neighbor Flagship winner for the 1998 Community Service Awards.

The hospital was recognized in the medium overseas category for supporting Cuban Exiles who reside on the isolated base 500 miles from Miami.

Under the direction of Mrs. Joan Marsh RN, the hospital's community health nurse, and LT Dan Fisher, MC, staff internist, a special committee was formed to serve as an advocate for the exiled population.

The committee implemented medical case management procedures and preventive medicine strategies. They worked to improve advanced directives within the aging population and the aeromedical evacuation system which provides for access to tertiary care facilities. The committee also modified base housing to better support the needs of the exiles and created a "meals on wheels" program using local volunteers to provide nutritional assistance.

Headline: Great Lakes captures silver anchor award By LT Youssef H. Aboul-Enein, MSC, Naval Hospital Great Lakes

GREAT LAKES, Ill - Great Lakes captured the 1998 Chief of Naval Education and Training (CNET) Silver Anchor Award in the large command category.

This award recognizes commands for excellence in career information, retention, transition assistance and personnel programs.

"This is an award not just for career counselors or retention specialists but for the entire command who participate, re-enlist and take advantage of programs designed to help Sailors make the most of their Naval career," said HM1 John Brown, career counselor accepting the award.

Among the items Great Lakes was a noted for was outstanding Career Information Training Course participation, proactive education and training staff, command orientation and indoctrination which include civilians and finally the mailing of birthday cards to Sailors to ensure annual verification of readiness to deploy status.

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Headline: TRICARE question and answer

Question: If I have a grievance for services rendered under the TRICARE program, who can I contact?

Answer: Any grievance should be reported to the MTF Commander or Lead Agent. Generally, the regional Managed Care Support contractor will be responsible for grievances for services rendered by civilian network providers under the TRICARE program. Contact the nearest TRICARE Service Center for more information.

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Headline: Healthwatch: Why do most colds strike during the fall and winter?

>From Healthline Magazine

Beginning in late August or early September, the incidence of colds increases slowly for a few weeks and remains high until March or April, when it declines. The seasonal variation may relate to the opening of schools and to cold weather, which prompt people to spend more time indoors and increase the chances that viruses will spread from person to person. How does humidity affect your risk of getting a cold?

Seasonal changes in relative humidity may also affect the prevalence of colds. The most common cold-causing viruses survive better when humidity is low-the colder months of the

year. Cold weather also may make the nasal passages' lining drier and more vulnerable to viral infection. Viruses cause infection by overcoming the body's complex defense system. The body's first line of defense is mucus, produced by the membranes in the nose and throat. Mucus traps the material we inhale: pollen, dust, bacteria, viruses. When a virus penetrates the mucus and enters a cell, it commandeers the protein-making machinery to manufacture new viruses which, in turn, attack surrounding cells.

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Comments about and ideas for MEDNEWS are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl W. Hicks, at email: mednews@us.med.navy.mil; Telephone 202/762-3223, (DSN) 762-3223, or fax 202/762-3224.

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